2013 Positron Emission Tomography Scanner Need Projection

Health Planning Area	2013 Projected Population [1]	Sum of Projected Cancer Cases [2]	Projected number of cancer patients that may benefit from scan [3]	Projected number of PET patients [4]	Projected number of PET units needed statewide per HPA [5]	Existing and Approved PET/CT Units [6]	Projected Unmet Need (Deficit) or Surplus [7]	Unmet Need (Type Unit Allowed) [7]	Aggregate Utilization [8]
HPA 01	802,560	3,793	1,897	2,655	0.97	1.20	0.2303	No Units Needed	73.9%
HPA 02	502,803	2,410	1,205	1,687	0.61	1.03	0.4194	No Units Needed	24.9%
HPA 03	5,004,967	23,669	11,835	16,569	6.02	12.06	6.0381	No Units Needed	48.9%
HPA 04	502,410	2,365	1,182	1,655	0.60	1.00	0.3981	No Units Needed	30.3%
HPA 05	551,399	2,537	1,269	1,776	0.65	1.16	0.5185	No Units Needed	23.8%
HPA 06	545,690	2,623	1,311	1,836	0.67	1.13	0.4639	No Units Needed	82.1%
HPA 07	459,111	2,114	1,057	1,480	0.54	1.00	0.4619	No Units Needed	30.1%
HPA 08	368,650	1,709	855	1,196	0.44	0.45	0.0143	No Units Needed	72.9%
HPA 09	151,945	637	319	446	0.16	0.05	(0.1074)	Mobile Unit	31.2%
HPA 10	555,951	2,595	1,297	1,816	0.66	2.69	2.0272	No Units Needed	46.2%
HPA 11	379,097	1,859	930	1,301	0.47	2.40	1.9240	No Units Needed	109.3%
HPA 12	246,327	1,177	589	824	0.30	0.22	(0.0846)	Mobile Unit	87.9%
HPA 13	363,210	1,743	872	1,220	0.44	0.44	0.0001	No Units Needed	98.7%
	10,434,120	**49,232**	**24,616**	**34,463**	**12.53**	**24.84**			**49.5%**

Notes and Sources:

[1] 2013 Resident Projected Population, Georgia Governor's Office of Planning and Budget, 4/2006 Release

[2] Projected cancer cases is determined by applying the most recent cancer incidence rates to the horizon year population. From "Age-Adjusted Cancer Incidence Rates per 100,000 (2000-2004)" reported by the Georgia Comprehensive Cancer Registry; Georgia Division of Public Health.

[3] Projected cancer cases who may benefit from PET scans is 50% of the projected number of cancer cases.

[4] The projected number of PET scan patients is determined by assuming that cancer cases account for two-thirds of all PET scans. The number of projected cancer cases who may benefit from a scan is multiplied by **1.4** to determine the number of projected PET patients.

[5] The number of PET scan units projected by HPA is determined by using an optimal utilization standard of **2,750** scans per unit per year. Projected number of PET patients is devided by **2,750**.

[6] Total Existing PET/CT scanner units reported. Mobile units allocated by HPA as reported.

[7] Projected unmet need is from the sum of the existing and approved PET scanners less the projected number of PET scan units in the horizon year. Where the projected unmet need is greater than -75.0% a fixed unit is allowed. If projected unmet need is greater than -3.2875% but less than -75.0% a mobile site is allowed.

[8] Aggregate utilization based on survey data for all units that were operational during 2006. Calculated by dividing the actual total number of scans by the capacity number of scans as if the available units were operating at optimal utilization. Aggregate utilization must be at or above 80% before new units will be approved.

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Prepared by: Data Resources and Analysis Section, Division of Health Planning

HEALTH PLANNING AREAS